2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N03000009649

Entity Name: BRIDGEBUILDERS OF WINTER PARK, INC.

Current Principal Place of Business:

311N PENNSYLVANIA AVE
SUITE 1
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

650 NORTHWOOD CIRCLE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-1843066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, JANIE
650 NORTHWOOD CIRCLE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	BAKER, JANIE	
Address:	650 NORTHWOOD CIRCLE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	DV P	( ) Delete
Name:	WASHINGTON, FAYE	
Address:	321 N CAPEN AVENUE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	DS	( ) Delete
Name:	DIXON, BEVERLY	
Address:	431 S PENNSYLVANIA AVE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	DT	( ) Delete
Name:	BYNUM, ROSE C	
Address:	516 W CANTON AVENUE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	ASD	( ) Delete
Name:	BAKER, FRANK SR	
Address:	650 NORTHWOOD CIRCLE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	FS	( ) Delete
Name:	SCOTT, RUDOLPH	
Address:	750 NORTHWOOD CIRCLE	
City-St-Zip:	WINTER PARK, FL 32789	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANIE BAKER PRES 04/14/2009

Electronic Signature of Signing Officer or Director — Date